

HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813 or P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: (808) 587-0460 FAX: (808) 587-0470 email: ethics@hawaiiethics.org

Web site: www.hawaii.gov/ethics

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LOBBYIST REGISTRATION FORM STATE OF HAWAII (Type or Print Clearly) STATE ETHICS COMMISSION (Type or Print Clearly)

PART! **LOBBYIST** NAME (Last) (First) (Middle) **TELEPHONE** Christine R.O. Karamatsu 539-0841 MAILING ADDRESS (Street) FAX 533-4945 1099 Alakea Street, Suite 1400 **EMAIL** ckaramatsu@awlaw.com (City) (State) (Zip Code) Honolulu HI 96813 EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby) **TELEPHONE** Slovin & Ito, LLP 539-0400 MAILING ADDRESS (Street) FAX 533-4945 1099 Alakea Street, Suite 1400 EMAIL (City) (State) (Zip Code) Honolulu HI 96813

PART II ORGANIZATION			
NAME OF ORGANIZATION YOU LOBBY	TELEPHONE		
Distilled Spirits Council of the	202-628-3544		
MAILING ADDRESS (Street)		FAX 202-682-8888	
1250 Eye Street N.W., Suite 400		EMAIL	
(City)	(State)	(Zip Code)	
Washington, D.C.		20005	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE	
Mark Gorman		202-628-3544	
MAILING ADDRESS (Street)		FAX 202-682-8888	
1250 Eye Street N.W., Suite 400		EMAIL mgorman@discus.org	
(City)	(State)	(Zip Code)	
Washington, D.C.		20005	

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY				
Agriculture	Education	☐ Human Services	Science, Technology & Economic Development	
Communications & Public Utilities	Government Operation & Finance	Intergovernmental Relations, International Affairs	☐ Tourism & Recreation	
Consumer Protection & Commerce	☐ Hawaiian Affairs	☐ Labor & Employment	Transportation	
Culture, Arts, Historic Preservation	☐ Health	Planning, Land & WaterUse Management	Other: (indicate below)	
Ecology, Energy Environmental Protection	☐ Housing	Public Safety & Corrections		
PART IV CERTIFICATION OF LOBBYIST				
I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.				
Christi Ct 1/18/13				
(Signature of Lobbyist) (Date)				
PART V AUTHORIZATION TO LOBBY				
NAME		TITLE OF AUTHORIZING OFFICE	ER OR PERSON REPRESENTED	
Mark Gorman				
NAME OF ORGANIZATION (if applicable)			TELEPHONE	
Distilled Spirits Council of the United States 2		202-628-3544		
MAILING ADDRESS (Street)			FAX 202-682-8888	
1250 Eye Street N.W., Suite 400		EMAIL ngorman@discus.org		
(City)	(State)	· · · · · · · · · · · · · · · · · · ·	(Zip Code)	
Washington, D.C.			20005	
I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.				
Mark	- Same		-16-13	
(Signature of Authorizing Officer or Person Represented)		sented)	(Date)	

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